



AGENDA

Equity, Diversity and Inclusion Committee

Meeting Date
January 12, 2026

Time
12:00 P.M.

Location
50 Water Street, Room 1701

CALL TO ORDER

Patricia Marthone

ADOPTION OF MINUTES

Patricia Marthone

September 9, 2025

DIVERSITY & INCLUSION UPDATE

Ivelesse Mendez-Justiniano

EQUITY & ACCESS COUNCIL UPDATE

Natalia Cineas
Nichola Davis

OLD BUSINESS

NEW BUSINESS

ADJOURNMENT

Equity, Diversity and Inclusion Committee Meeting – September 9, 2025

As Reported by: Patricia Marthone

Committee Members Present: Mitchell Katz, Patricia Marthone, Jackie Rowe-Adams, Vanessa Rodriguez

CALL TO ORDER

The meeting of the Equity, Diversity and Inclusion Committee of the NYC Health + Hospitals' Board was called to order at 4:04 p.m.

Upon motion made and duly second the minutes of the April 8, 2025 meeting was unanimously approved.

DIVERSITY AND INCLUSION UPDATE

Yvette Villanueva, Senior Vice President, Human Resources, provided an overview of the System's latest diversity and inclusion achievements and activities on behalf of Ivelisse Mendez-Justiniano, Vice President, Chief Diversity, Equity, & Inclusion Officer, who was unable to join the meeting.

Ms. Villanueva provided an update on the System's education and capacity building and reported that year-to-date there have been over 52K training completions, with the top two trainings being Sexual Harassment Prevention and Identifying and Managing Unconscious Bias. She also shared that there has been an educational virtual series focusing on women in leadership roles throughout NYC Health + Hospitals. She discussed how the organization continues to diversify its future workforce with an internship and career ladder program that focuses on providing opportunities to high school and college students from diverse communities in New York City.

Ms. Villanueva indicated that over 25.6 million minutes of interpretation services were provided between 1/1/2025 – 8/12/2025 with a 96.3% satisfaction rate. The top three languages were Spanish (19.5 million minutes), French (1.2 million minutes), and Bangla/Bengali (795K minutes). She confirmed that a Translation RFP is live with new contracts slated to start in 2026.

Ms. Villanueva also highlighted that the Medical Interpreter Skills Training (MIST) program has started receiving applications in August for the new cohort, which will now expand to an additional 5 languages, for a total of 20 languages. The program has steadily expanded, with new languages being added every year since its inception in 2021.

Ms. Villanueva continued with an update on veterans supporting services. Veteran Pop-ups have been taking place throughout the year;

half of the acute care facilities have already held a pop-up while the other half have dates scheduled in the remainder of 2025. There is also a Veteran Resource Expo scheduled to take place on October 22nd at Corporate Office which will honor Veterans and bring together a variety of veteran organizations, services, and information. Additionally, NYC H+H has earned the Military Friendly Pledge designation which means H+H fosters an inclusive workplace for military-affiliated individuals.

In the Disability Awareness area, Ms. Villanueva highlighted the ongoing Let's Talk Disability virtual training sessions that have been taking place monthly, as well as the Caring for Deaf & Hard of Hearing Patients Panel which took place in August. 52 attendees attended the panel discussion and learned about some of the common challenges and best ways to help care for deaf and hard of hearings patients.

Ms. Villanueva then announced that in May, all five NYC Health + Hospitals Post-Acute Care facilities were recognized as LGBTQ+ Long-Term Care Equality Leaders by The Human Rights Campaign Foundation and SAGE. Across all participating nursing homes throughout the nation, only 11% earned the highest Leader designation, which all five of the H+H Post-Acute Care facilities received.

Ms. Villanueva shared that during Pride Month in June, over 165 staff from 17 H+H facilities took part in nine external Pride events across the five boroughs. Community engagement was great as staff connected with over 2,220 New Yorkers at Pride Festivals.

From a Communications & Marketing perspective, Ms. Villanueva indicated that there have been several promotional materials distributed and Systemwide emails highlighting holidays and observances. She concluded the presentation by sharing how the System celebrated and participated in the National Puerto Rican Day and the National Dominican Day Parades.

Following the presentation there were several accolades from the Board Members about the great work that is being done with the disabled, highlighting of women's leaders, and translations services improvement, especially in meeting the increased demand for Wolof that was mentioned at previous meetings.

EQUITY & ACCESS COUNCIL UPDATE

Nichola Davis, Chief Population Health Officer, and Co-Chair of the Equity and Access Council ("Council") initiated the presentation and introduced Caroline Cooke and Erin Lewis to present the latest work being done within the Monitoring and Evaluation Workgroup.

Ms. Cooke started off with explaining that the Institute for Healthcare Improvement (IHI) defines four dimensions for validating race and ethnicity and language data, which is referred to as REaL

data. These dimensions are: Accuracy, Completeness, Timeliness, and Consistency.

Ms. Cooke then provided a recap of accomplishments: In 2021, the System made updates to the way race and ethnicity data is collected to improve consistency and completeness. This included standardizing the race and ethnicity categories, making the fields required to create more standardized reporting and also introducing some new data collection methods. She indicated that the goal is to evaluate if NYC H+H has complete and accurate real data across the System. The purpose of validating the data aside from reporting purposes, is to understand the demographics of the communities served and be able to identify, evaluate, and address health disparities.

The first step in validation was assessing completeness. The team looked at how complete the data is, if the changes that were implemented in 2021 improved collection rates, and determined the need to narrow down the population to those patients with a completed clinical encounter. The findings revealed that there was improvement - incomplete data halved from CY-20 to CY-23 and in CY-23, race/ethnicity data for all ages, service types and facilities were >97% complete.

The next dimension that was assessed was concordance. The concordance goal was to identify concordance between patient's race/ethnicity and ethnic background. Looking at ethnic background can provide construct validity for aggregate race/ethnicity and help improve cultural competency by understanding the communities served. There were some strong relationships between certain aggregate race/ethnicity groups and ethnic backgrounds observed, such as 50% of 'Hispanic/Latinx' patients had Latin American ethnic backgrounds, or that 73% of 'Asian' patients had East & SE Asian, Central & South Asian, or West Asian & North African backgrounds. Patients with Middle East/North African (MENA) regional backgrounds were distributed across all race/ethnicity groups and there was a lot of diversity among backgrounds mapping to 'Something Else'.

Ms. Cooke then handed off to Dr. Lewis, who continued the presentation by discussing the next dimension, accuracy. In order to assess accuracy, the team developed a 10-question survey to collect race, ethnicity, and language data based on a validated survey from IHI. Over 1,500 patients were invited to participate across acute care and Gotham facilities, and 45% of patients accepted the invitation. Results showed that there were high levels of accuracy for race, Hispanic/Latinx ethnicity, and language.

Ms. Cooke concluded the presentation by highlighting the team's key takeaways. NYC H+H has improved the REaL data questions since those updates were made in 2021. 98% of data were complete and 75% of surveyed patients had accurate race and ethnicity data in Epic to what they self-reported. Ethnic background data is very heterogeneous and provides rich information for exploring backgrounds by region. There

is also a plan to add a new category for MENA in the EPIC system to capture patient diversity and reduce "something else" responses. Lastly and most importantly, having valid REaL data allows NYC H+H to deliver more culturally sensitive and effective programming to the communities served.

Following the presentation there was discussion around how interesting it is to think of how patients identify themselves based on the options they are given, how they are asked, and how they feel in the moment they are asked. The team clarified for the Committee that the data gathering focused on patients 18 years and older.

A follow up item was to show in concordance the breakdown between other, unknown and something else in the race/ethnicity category.

The Board members expressed appreciation for the work done and the data shared by the team.

Dr. Marthone asked if there was any old business or new business.

Hearing no old or new business from the Committee members, the meeting was adjourned at 4:35 p.m.

Equity, Diversity & Inclusion Committee

Diversity, Equity & Inclusion Office Updates
January 12, 2026

Ivelesse Mendez-Justiniano, PhD

Vice President & Chief Diversity, Equity & Inclusion Officer

EDUCATION AND CAPACITY BUILDING

Required E-Learning Modules

Training	Modality	Total Completions*	Total Enrolled	% Completed
Sexual Harassment Prevention Training***	e-learning	46,889	48,526	97%

Top Training Breakdown (1/1/25 – 12/19/25)

Training	Modality	Total Completions*
Identifying and Managing Unconscious Bias**	e-learning	42,342
Women Who Lead Webinar Series	Workshop	901
Diversity and Inclusion in a Healthcare Setting (NRP)	Workshop	657
Let's Talk Disability	Workshop	620
Black History Month: WE – Unity, Community and Solidarity	Workshop	460
Achieving Health Equity for LGBTQ People	Workshop	384
TOTAL		45,364

* These are not unique employees as some may have engaged in more than one training.

**Unconscious Bias Training contributes to the general Diversity training requirement put forth under Local Law 121 and Senate Bill S911/A5160. Under these training requirements, several clinical titles must complete diversity and inclusion training inclusive of Unconscious Bias content every two years; NYC H+H reports out the training data completion annually.

*** Stop Sexual Harassment NYC Act 2018, NYS Labor Law Section 201 G

EDUCATION AND CAPACITY BUILDING

Women Who Lead Sessions

- Virtual series highlighting women in leadership positions at NYC Health + Hospitals
- **November:** Senior Vice President, Human Resources, Yvette Villanueva, reflected on resilience in navigating healthcare challenges, the need for self-care (mental, physical, and spiritual) to sustain effective leadership, and the value of support systems for balancing career and family life.
- **December:** Vice President, Data & AI, Divya Pathak, led an insightful discussion on how data-driven decision-making is transforming health care. She explored the pivotal role of data and emerging technologies, such as AI, in shaping leadership strategies, enhancing patient outcomes, empowering care teams, and revolutionizing clinical operations.

WOMEN WHO Lead

Episode Five

Leading in an Era of Disruption and Uncertainty

At NYC Health + Hospitals, women are making history every day—and their stories deserve to be shared.

Join us for a series of inspiring conversations with women leaders across our health care system. They'll share their unique journeys, challenges, and triumphs, offering insights and encouragement to all.

Wednesday, October 29, 2025
12:00 p.m. - 1:00 p.m.

Register

Yvette Villanueva
Senior Vice President
Human Resources

NYC
HEALTH+
HOSPITALS

WOMEN WHO Lead

Episode Six

From Data to Decision: Shaping the Future of Health Care Innovation

At NYC Health + Hospitals, women are making history every day—and their stories deserve to be shared.

This discussion will dive into the impact of data-driven decision-making in healthcare. Facilitating a conversation on how women, especially in leadership and tech roles, are using data and technological advances such as AI to drive healthcare innovations.

Wednesday, December 10, 2025
12:00 PM - 1:00 PM

Register

Divya Pathak
Vice President
Chief Data & Artificial Intelligence Officer

NYC
HEALTH+
HOSPITALS

EDUCATION AND CAPACITY BUILDING

2025 Educational Assistance Programs

Program Name	Eligible Titles	Service Commitment	Total Participants	Open Period
National Health Services Corps/Nurse Corp	Licensed RN, APRN, Nurse Faculty	2 years	145	3/24 - 4/17
NYS HESC LSW Loan Forgiveness	LSW	Varies	20	2/25 - 4/13
Nurses Across New York	Licensed RNs, LPNs	3 year	90	7/16 - 8/22
Group 11 Tuition Reimbursement Program	Group 11 Employee	N/A	95	1/1 -2/28
OMH Community Loan Repayment Programs (Various Rounds)	Licensed Psychiatrists, Psychiatric NP, PA, SW, Mental health counselors, Marriage and family therapists, Creative arts therapists, & Psychologists	3-year	100	Various periods from 2/5/25 - present
Public Service Loan Forgiveness	All employees on NYC H+H Payroll	N/A	\$ 4.8 Million*	Open Year Round
Notes: *To date H+H employees have self-reported a cumulative of 4.8 million in PSLF loan forgives since program inception in 2022.				

LANGUAGE ACCESS

Phone & Video Interpretation

- User feedback positive for OPI/VRI
 - 96.8% satisfaction (based on over 400K calls rated 1/1/2025 – 12/09/2025)
- 40,018,594 minutes of interpretation in 173 unique languages (1/1/2025 – 12/09/2025)
- 2026 Epic Integration Launch Coming Soon
 - Access interpreters within Epic keeping interpreter on Epic screen or transferring call to interpretation cart
 - Calls will automatically be documented within Epic with interpreter ID, call time, language, and duration

Written Translation

- Translation RFP is live with goal of new contracts to start in CY 2026.

Minutes by Language

Language	Calls	Minutes
Spanish	2,008,652	30,447,890
French	112,442	1,767,109
Bangla/Bengali	78,680	1,223,433
Haitian Creole	74,670	1,181,156
Mandarin	61,717	840,485
Arabic	45,775	707,742
Russian	54,671	681,444
Wolof	31,761	486,476
Cantonese	28,244	366,609
Albanian	12,838	193,396
Polish	14,028	187,994
ASL	8,398	155,746
Urdu	10,661	155,167
Nepali	10,116	148,174

VETERAN SUPPORT SERVICES

Veteran Pop-Ups:

- Veterans are connected with free resources provided by NYC Department of Veterans' Services

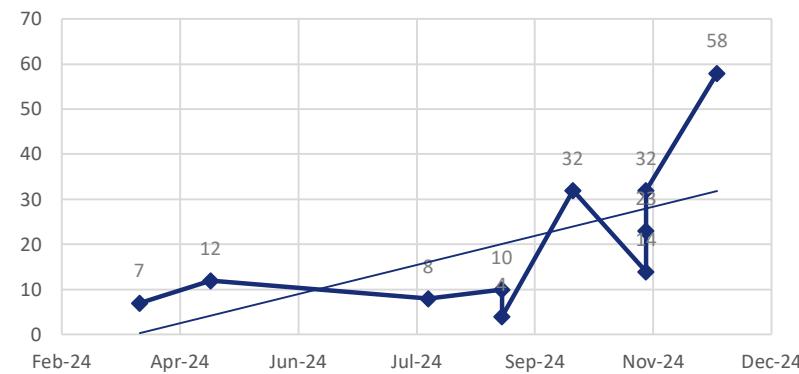
Veteran Resource Expo:

- Took place on October 22nd at 50 Water Street
- Brought together a variety of veteran organizations, services, and information
- Honored our veterans and their sacrifice

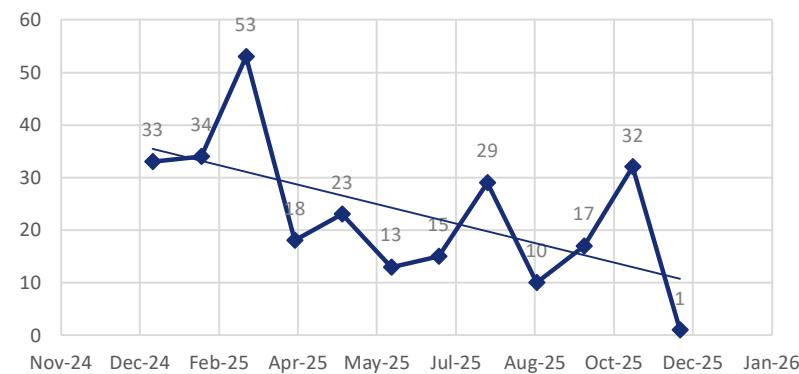
Upcoming Initiatives:

- **Veterans Advisory Council:** Council of internal stakeholders dedicated to developing initiatives, guidelines, and programs aimed at improving services and support for veterans.
- **Military Cultural Competency Training:** Collaboration with the Department of Veteran Services to promote understanding and sensitivity towards veterans.
- **Veteran Services Website & Digital Patient Navigator Toolkit:** A guide to help veterans navigate the NYC Health + Hospital system and community partners.
- **“We Salute You” Campaign:** A campaign that honors veterans' service while also encouraging veteran or active military employees to voluntarily disclose their military status.
- **Live Webinars Featuring Veteran Guest Speakers**

VETERAN POP-UP DATA 2024



VETERAN POP-UP DATA 2025



The drop in attendance at the Veterans Pop Up events indicate having reached saturation with the program. Consequently, 2026 will focus on new initiatives to best service our Veteran population.

LGBTQ+ EQUITY

Transgender Day of Remembrance

- Transgender Day of Remembrance - November 20.
- Transgender Awareness Week - November 13 to 19.
- Transgender Awareness Month - November.
 - In commemoration, the Office of Diversity, Equity & Inclusion hosted a virtual vigil. Over 370 staff members attended this important event. This was a substantial increase in participation from previous years due to new marketing strategies implemented.
 - Changing event time from 11am – 12pm to 12 – 1pm.
 - Increased outreach via Systemwide emails, flyers, and Diversity Spotlight Newsletter.
- Transgender Day of Remembrance:
 - Honored the lives lost throughout the past year.
 - Shared system resources available to support patients, staff, and visitors.
- Comments from attendees included:
 - “Very much appreciated that there was an opportunity to reflect on lives lost to hate and to learn about resources here in our system”
 - “I appreciated that TDOR was honored and that the negative impact on Black trans women was specifically highlighted.”



LGBTQ+ EQUITY

Long-Term Care Equality Index 2025



- The Long-Term Care Equality Index (LEI) is the only national benchmarking tool focused on LGBTQ+ inclusion in residential long-term care and senior housing communities. Across all participating nursing homes throughout the nation, only 11% earned the highest Leader designation.
- In May 2025, **all five** NYC Health + Hospitals Post-Acute Care facilities were recognized as ***LGBTQ+ Long-Term Care Equality Leaders*** by The Human Rights Campaign Foundation and SAGE. Since its inception in 2023, NYC Health + Hospitals has consistently achieved the “LGBTQ+ Long-Term Care Equality Leader” designation in the LEI.
- As part of the LEI requirements, **2,463 staff (67% of the staff)** completed the new *Bill of Rights for Long-Term Care Facility Residents who are LGBTQ or Living with HIV* training module. The LEI requirement was 20% of staff must complete to meet the award criteria.
- December 2025 - Evidence for the upcoming 2026 Healthcare Equality Index (HEI) award was submitted for **all 18 eligible facilities** (to be announced in May 2026). The HEI is the leading national benchmarking tool for LGBTQ+ inclusive policies and best practices in health care facilities.
- 2015 to present, NYC Health + Hospitals has consistently achieved the “LGBTQ+ Healthcare Equality Leader” designation in the HEI.

COMMUNICATIONS & MARKETING

September 2025

- Culture & Impact newsletter updated to include multicultural observances, trainings, events, and opportunities to connect.

October 2025

- Systemwide newsletter highlighting Indigenous Peoples' Day, Sukkot, Diwali, among others. Published a National Coming Out Day Insider article focusing on the importance of creating affirming clinical spaces.
- Veterans Resource Expo – Commissioner James Hendon shared opening remarks.

November 2025

- Systemwide newsletter – Veterans Day, Election Day, Transgender Awareness Week, Native American Heritage Month and others.
- Promotional materials distributed across channels for Leading with Emotional Intelligence, Navigating Social Identities, and LGBTQ+ Equity webinars.

December 2025

- Systemwide newsletter – Pansexual Pride, International Migrant Day, Hanukkah, and others.
- Culture & Impact Year-in-Review highlighted the departmental wins of 2025 calendar year.



2025 Culture & Impact ► Year-in-Review

598,162
hours
of interpretation services utilized

5
long-term care facilities recognized
as LGBTQ+ Leaders in the Human
Rights Campaign Foundation and
SAGE's 2025 Long-Term Care
Equality Index (LCEI)

579
staff
earned disability inclusion
designations via the Let's
Talk Disability training

82
hours
of education and
capacity building
initiatives offered

20+
languages
represented by our workforce

31,256
unconscious bias training
qualifications

296
veterans
provided with
personalized support

COMMUNITY ENGAGEMENT

- NYC Health + Hospitals' Office of Diversity, Equity & Inclusion hosted the Veteran Voices & Resource Expo featuring over 20 community-based organizations committed to empowering and supporting veteran New Yorkers.

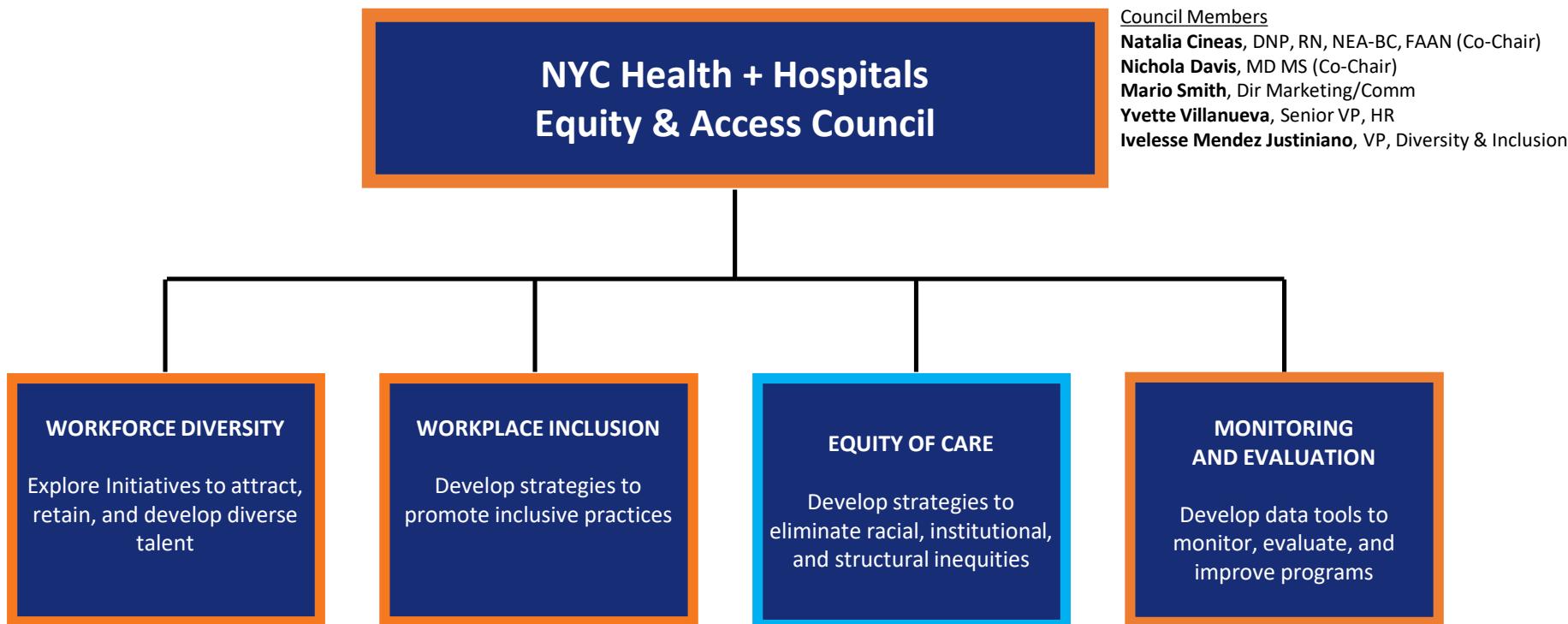


Equity & Access Council Update

Natalia Cineas, DNP, RN, NEA-BC
Sr. Vice President, Chief Nurse Executive

Nichola Davis, M.D.
Vice President, Chief of Population Officer

Equity and Access Council Governance Structure



Equity of Care Workgroup

Presented by: Nichola Davis MD, MS
Vice President, Chief Population Health Officer, Co-Chair Equity & Access Council

Workgroup Lead

Leo Gordon Eisenstein, MD

Director of Health Equity, Social Medicine Team
Office of Population Health and Ambulatory Care

Equity of Care Projects

- **Facilitating Access to Kidney Transplant**
 - Dr. John Wagner, Dr. Leo Eisenstein, Dr. Nichola Davis, Shaina Fuller MPH
- **Expanding Care for Patients with Sickle Cell Disease**
 - Dr. Kenneth Rivlin, Dr. Leo Eisenstein, Dr. Nichola Davis, Dr. Adjoa Mante, Candace Alphonso MPH

Kidney Transplant Access – Background

Project Leaders

- John Wagner MD, MBA, Leo Eisenstein MD, Nichola Davis MD, MS, Shaina Fuller MPH

Background

- H+H participation in DOHMH's CERCA (Coalition to End Racism in Clinical Algorithms)
- H+H eliminated race from eGFR in 2022
- Doris Duke Foundation: \$300,000 grant to NYC H+H to evaluate impact of the eGFR algorithm change, including assessment of transplant access



PERSPECTIVE | EFFORTS TOWARD EQUITY

f X in E

Disparities in Kidney Disease and the Race-Neutral eGFR — Research and Action in NYC's Public Hospital System

Authors: Angelica Bocour, M.P.H., Erin Lewis, M.D., Silas Lee, M.S., and Leo G. Eisenstein, M.D.  [Author & Affiliations](#)

Published October 25, 2025 | *N Engl J Med* 2025;393:1657-1658 | DOI: 10.1056/NEJMp2512030

Transplant Access – Pilot Intervention

Equity care gap: NYC H+H is not a transplant center → limited ability to support transplant access

- **June 2023:** *Is there more H+H could do to support transplant candidates?*
- **March 2024:** Working group to characterize care gap and design pilot intervention
 - Insights from local transplant center: In 2023, **64%** of H+H patients referred for transplant did not progress to waitlist due to incomplete workup or financial/insurance complications.
- **January 2025:** Inaugural H+H Transplant Navigator hired

H+H Transplant Navigator - Overview

Pilot Parameters

- Organ: **Kidney**
- Geography: **Brooklyn**

Navigator Role

- **Outreach** to patients identified by nephrologists or PCPs as potential transplant candidates
 - Patient navigation
 - Education about transplant options
- **Monthly meetings** with local transplant centers
 - Review shared patients
 - Identify outstanding workup or barriers
 - Troubleshoot across systems

Transplant Navigator - Data

- **Population:** Potential candidates for kidney transplant, with PCP and/or nephrology care at Woodhull, Kings County, or South Brooklyn
- **Timeframe:** Feb - Oct 2025
- **# of patients engaged:** **154**
- **# of patient encounters:** **677**

Age	PCP Site		
30-40	8%	Kings County	36%
40-50	14%	Woodhull	25%
50-60	21%	South Brooklyn	11%
60+	54%	No known PCP	16%

***Opportunity:** Re-engagement in primary care for medically complex population.

Expand Care for Patients with Sickle Cell Disease (SCD)

Project Leaders

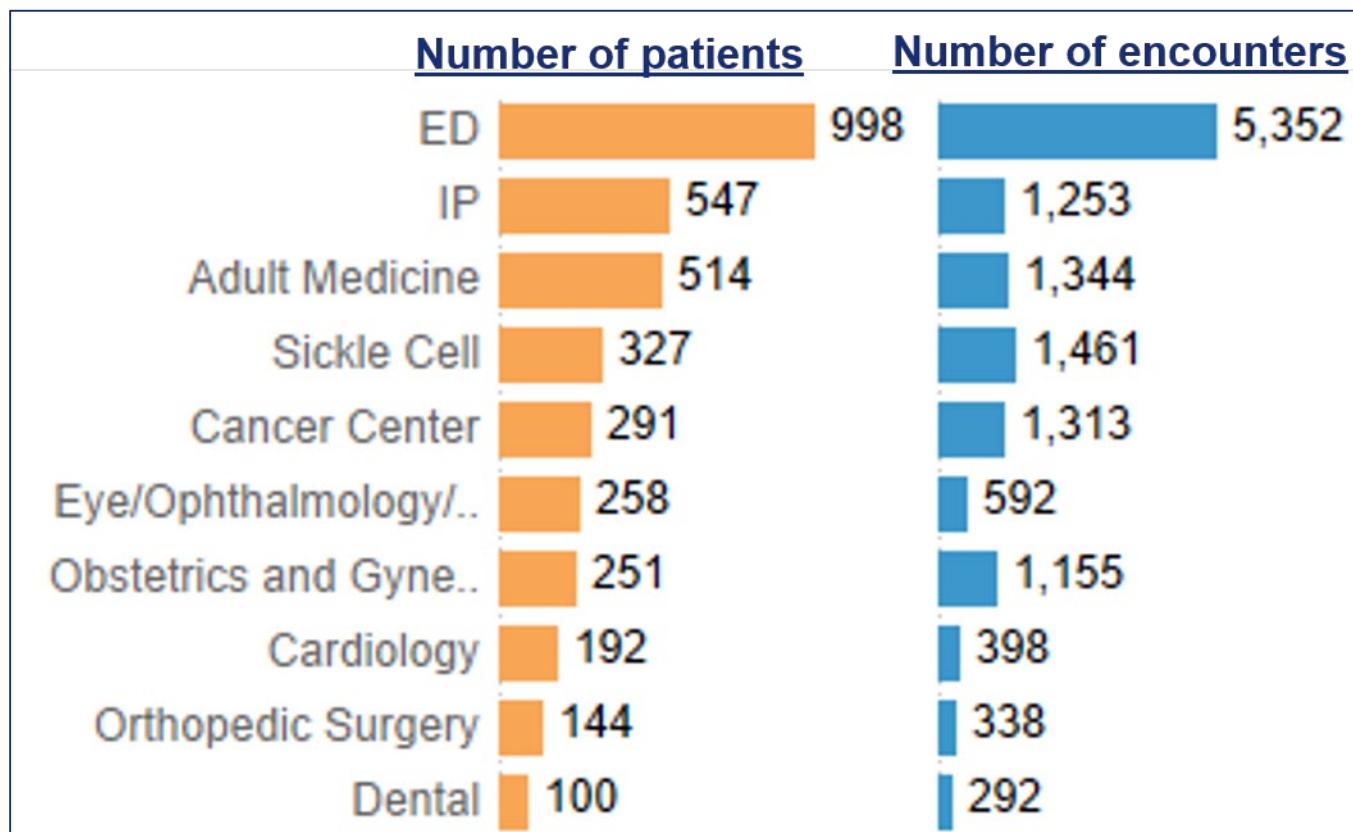
- Kenneth Rivlin MD, Leo Eisenstein MD, Nichola Davis MD, MS

Background

- H+H: one of the largest providers of SCD care in the US
 - Six pediatric hemoglobinopathy centers
 - Two adult SCD centers (Kings County & Queens)
- Drop-off in PCP engagement from pediatrics to adult
 - Pediatrics: 79% with H+H PCP
 - Adult: 40% with H+H PCP → 1,132 adults with no H+H PCP
- SCD = single qualifying diagnosis for Health Home
 - April 2025: 64 patients with SCD enrolled in H+H Care Coordination
- Difficulty accessing comprehensive SCD services contributes to:
 - Fragmented care
 - Higher rates of ED visits

Pop Health Dashboard: Adults with SCD in CY 2025

- System-wide number of unique patients: 1,761
- System-wide number of encounters: 17,917



Expanding Care for Patients with Sickle Cell Disease

Goals

- Warm hand-off transitions from pediatrics to adult
- Access to as-needed outpatient infusion services for pain episodes
- Integration of psychosocial support services

Progress

- 2023-2024: stakeholder discussions across H+H
- 2024: Development of clinical and business plans
- Jan 2025: Approval to expand adult SCD services
- Feb 2025: Received grant for workforce development

Expanding Care for Patients with Sickle Cell Disease

Previously: H+H had no adult services devoted to SCD in Harlem or The Bronx

Now: Each clinic staffed with at least one full-time provider, CHW, and access to SW services

- **Harlem Hospital: Establish new adult SCD clinic**
 - Physician and CHW hired in Fall 2025
 - Anticipated clinic start date: Jan 2026
- **Kings County Hospital: Enhance existing adult SCD clinic**
 - CHW hired in Fall 2025
 - Additional physician and social worker in credentialing as of December 2025
- **Queens Hospital: Enhance existing adult SCD clinic**
 - Provider already in place
 - Social worker hired in Fall 2025

Expanding Care for Patients with SCD: Key Metrics

Operational Metrics

1. PCP engagement
2. Number of ED visits associated with SCD pain episodes
3. Number of inpatient admissions associated with SCD complications
4. New patient volume
5. Infusion center volume
6. CHW and LCSW engagement, including group sessions
7. Patient satisfaction
8. Enrollment in H+H Health Home, Community Care

Clinical Metrics

1. Prescriptions written for hydroxyurea or other disease-modifying therapies for SCD
2. Completion rates of standard screenings and vaccinations indicated for patients with SCD